## U.S. Department of Justinese 1:19-cv-02134-SAG Document 4-2 File 1880 158 Page FUFT AND RETURN United States Marshals Service See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF								COURT CASE NUMBER			
DEFENDANT								TYPE OF PROCESS			
DEI ENDAMI								THE OF IROCESS			
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE											
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)											
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW								Number of process to be served with this Form 285			
								Number of parties to be served in this case			
							•	Check for service on U.S.A.			
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):											
Signature of Attorney other Originator requesting service on behalf of:  DEFENDANT  TELEPHONE								NUMBER DATE			
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE											
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)  Total Pro			District of Origin No.	District to Serve	Signature of Authorized USMS De			Deputy or Clerk	Date		
I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.											
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)											
Name and title of individual served (if not shown above)							Date	Time	am pm		
Address (complete only different than shown above)								Signature of U.S. Marshal or Deputy			
Service Fee	Total Mileage (including ende	_	orwarding Fee	Total Charges	Advance	Deposits	1	Amount owed to U.S. Marshal* or (Amount of Refund*)			

REMARKS